PTO/SB/05 (08-03).

Approved for use through 07/31/2006. OMB 0651-0032
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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| Attorney Docket No. | | 416272005200 | | | | | |
|---------------------|---|---------------------|--|--|--|--|--|
| First In | ventor | Marc K. HELLERSTEIN | | | | | |
| Title | DEUTERATED GLUCOSE OR FAT TOLERANCE TESTS FOR HIGH-THROUGHPUT MEASUREMENT OF THE METABOLISM OF SUGARS OR FATTY ACIDS IN THE BODY | | | | | | |

| | xpress Mail Label No. EL 990 374 873 US | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application conten | MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | | |
| Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) | | | | | | | |
| 3. X Specification [Total Pages 39 (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications |] a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper | | | | | | | |
| Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention | c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) | | | | | | | |
| Brief Summary of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description | | | | | | | | |
| - Claim(s) - Abstract of the Disclosure | 10. 37 CFR 3.73(b) Statement Power of Attorney | | | | | | | |
| 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 6] 5. Oath or Declaration (UNSIGNED) [Total Sheets 2] | 11. English Translation Document (if applicable) 1 | | | | | | | |
| a. Newly executed (original or copy) | Statement (IDS)/PTO-1449 L Citations 13. Preliminary Amendment | | | | | | | |
| b. Copy from a prior application (37 CFR 1.63(d)). (for continuation/divisional with Box 18 completed) 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) | | | | | | | | |
| i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, 27 CEP 1 8(4)(2)(2)(2)(2)(3)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4) | Ceramed Copy of Princity Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | | | | | | | |
| see 37 CFR 1.63(d)(2) and 1.33(b). | 17. Other: | | | | | | | |
| 6. X Application Data Sheet. See 37 CFR 1.76 - 2 pgs | supply the requisite information below and in the first sentence of the | | | | | | | |
| specification following the title, or in an Application Data Sheet under Continuation Divisional Continuation-in-p | er 37 CFR 1.76: | | | | | | | |
| Prior application information: Examiner | Art Unit: | | | | | | | |
| under Box 5b, is considered a part of the disclosure of the accompa | closure of the prior application, from which an oath or declaration is supplied anying continuation or divisional application and is hereby incorporated by on has been inadvertently omitted from the submitted application parts. | | | | | | | |
| 19. CORRE | SPONDENCE ADDRESS | | | | | | | |
| X Customer Number: 20872 | OR Correspondence address below | | | | | | | |
| Name | | | | | | | | |
| Address | | | | | | | | |
| City State | Zip Code | | | | | | | |
| Country · Telepho | one Fax | | | | | | | |
| Name (Print/Type) Michael R. Ward | Registration No. (Attorney/Agent) 38,651 | | | | | | | |
| Signature Wichael R Ward Date November 4, 2003 | | | | | | | | |
| 1374873US | | | | | | | | |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 990 374 873 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below

Dated: November 4, 2003

(Lilia Olsen)

PTO/SB/17 (10-03)

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| CCC TO A MORRITTAL | T | Complete if Known | | | | | | | |
|---|--|--|--------------|---------------|---|---|--------------------------|----------|--|
| FEE TRANSMITTAL | Application Number | | | | er | Not Y t Assigned | | | |
| for EV 2004 | Filing Date | | | | Concurrently Herewith | | | | |
| for FY 2004 | | First Named Inventor | | | | MARC K. HELLERSTEIN | | | |
| Effective 10/01/2003, Patent fees are subject to annual revision. | Examiner Name | | | | | Not Yet Assigned | | | |
| X Applicant claims small entity status. See 37 CFR 1.27 | Art Unit | | | | | Not Yet Assigned | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 885.00 | Attorney Docket No. | | | | | 416272005200 | | | |
| | | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) Credit Money Other Name | FEE CALCULATION (continued) | | | | | | | | |
| Check Card Order Other None | 3. ADDITIONAL FEES | | | | | | | | |
| X Deposit Account: | , | | | | | | | | |
| Deposit Account 03-1952 | L'arge Fee | Entity | Small Fee | Entity Fee | - | | | | |
| Account Number 03-1952 | Code | (\$) | Code | (\$) | | Fee Desc | ription | Fee Paid | |
| Deposit Account Morrison & Foerster LLP | 1051 | 130 | 2051 | 65 | Surcharge - | - late filing fe | e or oath | | |
| Name | 1052 | 50 | 2052 | 25 | Surcharge - | - late provisi | onal filing fee or cover | 1. | |
| The Director is authorized to: (check all that apply) | 1002 | | 2002 | | sheet. | et. | | | |
| X Charge fee(s) indicated below X Credit any overpayments | 1053 | 130 | 1053 | 130 | Non-English | n specificatio | | | |
| X Charge any additional fee(s) or any underpayment of fee(s) | 1812 | 2,520 | 1812 | 2,520 | For filing a re | equest for exp | | | |
| Charge fee(s) indicated below, except for the filling fee | 1804 | 920* | 1804 | 920* | Requesting Examiner a | | of SIR prior to | | |
| to the above-identified deposit account. | 1805 | 1,840* | 1805 | 1,840* | Requesting | publication of | of SIR after | | |
| FEE CALCULATION | 1251 | 110 | 2251 | 55 | Examiner a | ction or reply within | | | |
| 1. BASIC FILING FEE | 1252 | 420 | 2252 | 210 | | or reply within | | | |
| Large Entity Small Entity | 1253 | 950 | 2253 | 475 | Extension for | or, reply, withi | third month | | |
| Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$) | 1254 | 1,480 | 2254 | 740 | Extension for | or reply within | fourth month | | |
| 1001 770 2001 385 Utility filing fee 385.00 | 1255 | 2,010 | 2255 | 1,005 | Extension for | or reply within | n fifth month | | |
| 1002 340 2002 170 Design filing fee | 1401 | 330 | 2401 | 165 | Notice of Ap | opeal | | | |
| 1003 530 2003 265 Plant filing fee | 1402 | 330 | 2402 | 165 | Filing a brie | f in support o | f an appeal | | |
| 1004 770 2004 385 Reissue filing fee | 1403 | 290 | 2403 | 145 | Request for | oral hearing | | | |
| 1005 160 2005 80 Provisional filing fee | 1451 | 1,510 | 1451 | | | on to institute a public use proceeding | | | |
| SUBTOTAL (1) (\$) 385.00 | 1452 1453 | 110 1,330 | 2452 2453 | 55 665 | | tion to revive – unavoidable tion to revive - unintentional | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 1501 | 1,330 | 2501 | 665 | | fee (or reiss | | | |
| Extra Fee from | 1502 | 480 | 2502 | 240 | Design issu | - | | | |
| Claims below Fee Paid Total Claims 66 -20 = 46 x 9 = 414.00 | 1503 | 640 | 2503 | 320 | Plant issue | | | | |
| Independent 5 3 = 2 x 43 = 86.00 | 1460 | 130 | 1460 | 130 | | the Commis | sioner. | | |
| Claims Unitary Multiple Dependent 145 = 0.00 | 1807 | 50 | 1807 | 50 | Processing | ng fee under 37 CFR 1.17(q) | | | |
| | 1806 | 180 | 1806 | 180 | _ | | on Disclosure Stmt | | |
| Fee Fee Fee Fee Fee Description | 8021 | 40 | 8021 | 40 | Recording e | each patent a | ssignment per | | |
| Code (s) | | | | • | | | of properties) | | |
| 1202 18 2202 9 Claims in excess of 20 1201 86 2201. 43 Independent claims in excess of 3 | 1809 | 770 | 2809 | 385 | (37 CFR 1.1 | g a submission after final rejection CFR 1.129(a)) | | | |
| 1203 290 2203 145 Multiple dependent claim, if not paid | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37CFR 1.129(b)) | | | | |
| 1204 86 2204 43 ** Reissue independent claims | 1801 | 770 | 2801 | 385 | Request for | Continued E | xamination (RCE) | | |
| over original patent 1205 18 2205 9 ** Reissue claims in excess of 20 | 1802 | 900 | 1802 | 900 | | expedited ex | camination | | |
| and over original patent | Other f | Other fee (specify) | | | | | | | |
| SUBTOTAL (2) (\$) 500.00 | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00 | | | | | | | | |
| **or number previously paid, if greater; For Reissues, see above | | | | | | | | | |
| SUBMITTED BY | | | | | (Complete | (if applicable)) | | | |
| | | ration No. 38,651 Telephone 415/268-6237 | | | | | | | |
| Signature Michael RW | | | | | | | 203 | | |
| Signature May Charles & Was | 769 | | | | | Date | MOVEHIDEL 4, Z | ,us | |